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**FACSIMILE TRANSMITTAL**

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**TO:**

**Name:** Examiner M. Priddy

**Firm:** U.S. Patent & Trademark Office

**Fax No.:** 703-872-9302

**Subject:** U.S. Patent Application  
No. 09/768,991

**Filed:** January 23, 2001

**INTERBODY SPINAL IMPLANT WITH  
TRAILING END ADAPTED TO RECEIVE  
BONE SCREWS (as amended)**

**Attorney Docket No.** 101.0101-00000

**Customer No.** 22882

**FROM:**

**Name:** Thomas H. Martin, Esq.

**Phone No.:** 703-818-3261

**No. of Pages (including this):** 6

**Date:** May 15, 2002

**Confirmation Copy to Follow:** No

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**Message:**

**CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

I hereby certify that the attached Transmittal Form (in duplicate), and Amendment with attachment are being facsimile transmitted to the U.S. Patent and Trademark Office on May 15, 2002.

  
Sandra L. Blackmon

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FORM PTO-1083

Attorney Docket No.: 101.0101-00000  
Customer No. 22882

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary K. Michelson, M.D.

Art Unit: 3731

Serial No: 09/768,991

Filed: January 23, 2001

For: INTERBODY SPINAL IMPLANT WITH  
TRAILING END ADAPTED TO RECEIVE  
BONE SCREWS (as amended)Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☒ No additional fee is required.
- ☐ Applicant hereby requests a \*\*\*month extension of time to respond to the above office action.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1066. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
MARTIN & FERRARO, LLP

Date: May 15, 2002

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